

ZONING PERMIT

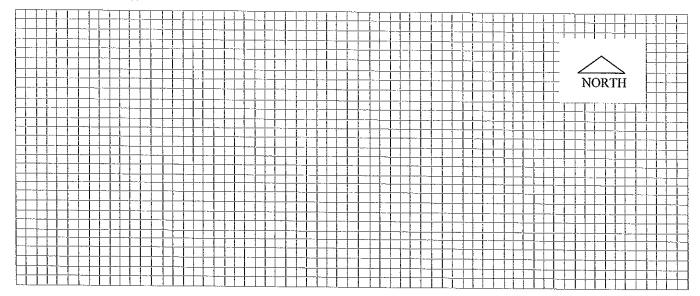
APPLICATION

Certificate of Zoning Compliance
York County, Nebraska

\$_____ Fee Paid (initials)_____

| | | ETELY by applicant and delivered to the Office of the | |
|---------------------------|--|---|---|
| | | Mailing Address: | |
| Tele | ephone No. () | | |
| Leg | al Description of Property affecte | d by this Application: | |
| Des | scription of proposed construction | / development and its intended use: | |
| | ALL of the following infor | nation and the information required on the sed and will be returned to the applicant.) | _ |
| | | ING IS PROPOSED, such dwelling will be the ONLY located: YES NO | dwelling in the quarter/quarter |
| | A NEW RESIDENTIAL DWELL: YES NO | ING IS PROPOSED, such dwelling is at least ¼ mile fi | rom any confined livestock feeding |
| Pro | perty Size (acres): Build | ing/Structure Area (sq. ft.) Height (feet): | Estimated Cost: \$ |
| Dis (fee | stance from the right-of-way line of et): Any second r | of all roadway(s) abutting the property to the nearest pool oadway (feet): | int of the building/structure proposed |
| <u>On</u> | the back of this application, ske | etch a site plan of the development proposed showing | g ALL of the following information: |
| 1 | The location of the proposed stru | acture on the premises and the location of the driveway | with north to the top of the sketch. |
| ✓ | The location and names of all ro | adways adjoining the premises. | |
| ✓ | This distances (in feet) from the | side and rear property lines (if less than 30 feet). | |
| 1 | IF the proposed use is a commercial, industrial or public use, indicate the number and location of buildings, parking spaces and the proposed type, location, size and height of any signs proposed. | | |
| ✓ | IF the proposed use is a new or ewaste handling facilities. | expanded confined livestock feeding use, indicate the lo | ocation of lots, pens, buildings and |
| an Co cor wh | d know the same to be true and dall liability that may result fro bunty, Nebraska has not adopted nstruction of any building or struction may result from any non-co | al authority to file this application, that I have comp correct. I further certify that I will hold York Coun m the development of the proposed construction/use I any type or form of building or other code which w ucture and that I will hold York County, Nebraska I mpliance with State codes or regulations or defect in the of zoning compliance or other approval is require | ety, Nebraska harmless from any e and that I am aware that York yould regulate the design and harmless from any and all liability any building or structure for |
| $\overline{\mathbf{p_r}}$ | inted name of Applicant | Signature of Applicant | Date of Application |

Sketch Site Plan here:



THIS SECTION TO BE COMPLETED BY ZONING ADMINISTRATOR:

| 1. | The real estate described in this application is zoned:GA, General AgICD, Interstate Commercial | | | |
|-----|---|--|--|--|
| | RCI, Rural Commercial/ Industrial | | | |
| 2. | The use proposed in this application is permitted in this zoning district:YESNO | | | |
| 3. | If application is for construction of a new residential dwelling or placement of a manufactured home, the proposed dwelling complies with the restriction of one dwelling per quarter-quarter section:YESNO | | | |
| 4. | The building/structure proposed complies with: Lot Area and Width requirements: YES NO Height limitations: YES NO Front, side and rear setback requirements: YES NO | | | |
| 5. | The use is located in an Airport Hazard zoning district?YESNO Flood Hazard District?YESNO If yes, the use proposed complies with the requirements of applicable regulations:YESNO | | | |
| 6. | | | | |
| 7. | Use proposed requires Special Exception approval:YESNO If yes, special exception approval has been given subject to the following conditions: | | | |
| 8. | If a Variance was requested, a Variance was granted subject to the following conditions: | | | |
| 9. | This application is APPROVED and a zoning permit / certificate of zoning compliance is hereby issued, subject to the following conditions: | | | |
| 10. | This application isDISAPPROVED for the following reason(s): | | | |
| 11. | Date of issuance / disapproval of the permit / certificate: | | | |
| | Signature of Zoning Administrator | | | |